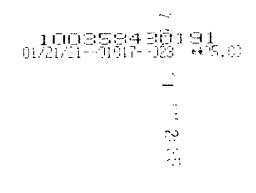


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R. WHITE

COVER LETTER

	Registration Se Division of Cor						
SUBJEC		TRUCKING & TRANSPORT.	LLC				
SUBJEC	.1:	Name of Limited Liability Company					
The encl	osed Articles of a	Amendment and fee(s) are sub	mitted for filing.				
Please re	turn all correspo	ndence concerning this matter	to the following:				
		WALTER J SINEGAL II					
			Name of Person	_ 			
		SINEGAL INVESTMENT	GROUP, LLC				
		-	Firm/Company				
13138 STANTHORNE AVENUE							
		Address					
		ORLANDO, FLORIDA 32	2832				
			City/State and Zip Code	·			
		GABRIELSINEGAL@YAI					
		E-mail address: (i	to be used for future annual report notif	ication)			
For furth	er information co	oncerning this matter, please ca	all:				
WALTE	R J SINEGAL II	i.	225 268-1595				
	Name of	Person	Area Code Daytime	: Telephone Number			
Enclosed	is a check for th	e following amount:					
≶ (\$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SINEGAL TRUCKING & TRANSPORT, LLC

51 74 2:00

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compan	y were filed on 1/4/2021	and assigned
Florida document number 1.21000013675		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		·
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		- 1 - 1
(Mailing address MAY BE A POST OFFICE BOX)		
	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	dress
		, Florida
	City	Zip Code
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: Enter Florida street address		
provisions of all statutes relative to the proper and complete	e performance of my duties provided for in Chapter 60	e, and I am familiar with and 15, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SINEGAL INVESTMENT GROUI	13138 STANTHORNE AVENUE	= Add
		ORLANDO, FLORIDA 32832	□Remove
			[] Change
MR	WALTER J SINEGAL II.	13138 STANTHORNE AVENUE	
		ORLANDO, FLORIDA 32832	
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
		,	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

ımei	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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i effe <u>te:</u> l	tive date, if other than the date of filing:
cord s tile	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ed <u>.</u>	January 21 2021.
	Signature of a member or authorized representative of a member
	WALTER JOSEPH SINEGAL II.
	Typed or printed name of signee